Rheumatism

No 34 #2

A Thesis

On Rheumatism.

By Joseph K Swift of Penna

passed March 28 1816

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In proposing myself a candidate for a Medical Degree, I have selected Rheumatism as the subject of my Thesis. That I should advance any new ideas upon it, can scarcely be expected, after it has already been treated of by so many eminent Physicians; I therefore absit no pretensions to originality, but have merely endeavoured to make as judicious a selection from the writings of others as my abilities would allow. —

Rheumatism has been arranged by Dr Cullen in his Class of Pyrexia, and Order of Phlegmasia. —
It is divided into two distinct species, viz. the Acute and Chronic. It is the acute Rheumatism only which can, with propriety, be said to belong to the Phlegmasia, for we discover little, or no inflammatory action in the Chronic stage. —
I shall commence with the consideration of the Acute Rheumatism. It is one of the most common diseases in all climates where a great

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vicissitude of weather occurs; but in those of an uniform temperature, whether warm or cold, it is more rarely found: In this country, we generally observe the greatest number of cases during the autumnal and vernal months; but we see it prevailing, under similar circumstances, at every season of the year.—

From the resemblance of their symptoms, Rheumatism and Gout have frequently been confounded with each other; they are however specifically distinct, and it may not be improper to designate the most material points wherein they differ.

Rheumatism is less confined to the feet than Gout, and is more liable to shift its place:—

Rheumatic pains are not so shooting as those of Gout.—

Rheumatism principally affects the larger joints, as the knee, hip &c. whereas Gout attacks the

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the smaller ones.— Rheumatism is not hereditary, Gout is.—

Rheumatism is not preceeded by affections of the stomach, or other viscera, as Gout is.—

Rheumatism is not, like Gout, disposed to return at stated intervals.—

The British Physicians say that women are most subject to Rheumatism; men, to Gout.—

Rheumatism may occur at any period of life, but Gout is usually confined to adults.—

In Rheumatism, the deposition of calcareous matter in the joints so frequently observed in Gout, are never discovered.—

Other particulars in which the two diseases vary might be mentioned, but those already enumerated, will enable us to form a diagnosis between them.—

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soils, and Dr Barton has remarked, that it is extremely common in some calcareous counties in Virginia. —

The Remote Causes are various. It is most frequently occasioned by the application of cold to one part of the body, whilst the others are kept warm. Dampness, from wearing wet garments, or getting the feet wet, oftentimes produces it. —

Cullen says Rheumatism proceeds from Marsh Miasmata, and of this there can be no doubt, as in many instances we perceive it putting on the Intermittent form.

Mechanical matters of various kinds may give rise to it, and to these its frequency among painters, potters and gilders may be ascribed. —

In some particular cases it has been attributed to the fumes of Arsenic. —

Dr Barton related the case of a young Gentleman

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in whom it originated from the sudden suppression of the Gonorrhœal discharge by astringent injections; every medicine which was exhibited was ineffectual, and afforded no relief until the discharge was restored, when the Rheumatism disappeared.

It may arise from the suppression of Hemorrhagies of any kind, and from the healing up of Ulcers, and some cutaneous affections, as the Itch.

The Predisposing Causes are Cold — a variable climate — the age of puberty and the decline of life — excessive evacuations — Spring and Autumn — great muscular irritation.

The Symptoms are — pains of the joints — these are generally confined to the joints alone, but sometimes affect the muscles in their passage from one joint to another. The larger joints, as the knee, hip and shoulder, are most liable

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to be the seats of the disease. The pains are mostly felt in particular parts before any febrile symptoms appear, and when they are extensively diffused, the disease is ushered in by a cold fit, which is immediately succeeded by the other symptoms. —

When there is little or no fever the pain is commonly confined to one joint; but if it be considerable, several may be affected at the same time. —

The pains do not commonly remain long in one joint, but shift to others, and occasionally return again to parts from which they had been translated. —

The exacerbations of the fever take place during the night, observing an Intermittent or Remittent form, and 'tis during this period that the pains generally shift. —

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After the joints have been affected for some time, they swell, and become red and painful to the touch. The pains are mostly mitigated by this swelling, but not always entirely removed. —

If sweating come on, it commonly does so in the commencement of the disease, but it is seldom very copious, nor does it often prove critical. —

The pulse is full, hard and frequent. The urine is high-coloured, and in the early stage of the disease, without sediment; but as it progresses, it deposits the lateritious sediment. —

The blood drawn from a vein exhibits the inflammatory crust. —

Though Rheumatism differs from most of the Phlegmasiæ in scarcely ever terminating in suppuration, yet effusions of a serous fluid are sometimes made into the sheaths of the tendons. These tumours should not be opened but left

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for the absorbent vessels to remove, as incisions into them produce ulcers, which are extremely difficult to heal.

With these symptoms Rheumatism generally continues for fourteen or fifteen days; though in some cases, even under the best management it may continue for several weeks.

Rheumatism of the Intermittent kind, though the easiest to cure with proper care, is frequently of the longest duration, sometimes remaining even for years. –

It is seldom a dangerous disease, but it sometimes attacks the heart, when it is mostly fatal. Mr Dundas had nine patients thus affected, of whom, seven died. –

On dissection of persons who have died of this disease, effusions are at times found within the cranium, or topical affections of some of the

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viscera are perceived; in some of the above mentioned cases of Mr Dunday, the heart was enlarged, and of a whitish colour. — In the joints, thickening of the membranes, adhesions and gelatinous effusions are discovered. —

Respecting the different theories of the proximate cause, I shall say nothing. According to Dr Barton it is the same as that of any other inflammation, depending upon an increased afflux of blood to a part, whilst it is exposed to the action of cold. —

Cure of Acute Rheumatism

In the curative treatment, the usual remedies for inflammation must be vigorously prosecuted

Venesection. From the inflammatory nature of the disease, it must be obvious, that this is one of the most important remedies. The blood

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must be drawn largely during the first stages, and the bleeding repeated as often as the pulse and the state of the symptoms may demand: we must, however, at the same time, be cautious not to carry it to such an extent as to induce debility, and thereby incur the danger of bringing on the Chronic stage.

The cure should not be trusted to it alone, though it is one of the most powerful auxiliary means.—

It is of least service in Intermittent cases, and in that species proceeding from miasmata. The orifice made into the vein should be large, that the blood may be evacuated in as short a space of time as possible. Topical bleeding by cupping or leeches is oftentimes beneficial, where the pain of

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the joints is very acute, and where there is much redness and swelling. But it seldom effects a cure, and is very liable to shift the pains.—

Purging is of great importance in lessening the inflammatory state of the system. Those Cathartics which produce the least general irritation, are to be preferred. They do not, however, reduce the fever so speedily as Blood-letting; and where the disease is very severe and extensive, their exhibition is attended with considerable inconvenience, on account of the pain the patient experiences in going to stool.—

In some particular cases there exists a remarkable excitement of the arterial system at the same time, the patient is much reduced, and labours under many of the symptoms of Chronic Rheumatism. For the remo-

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val of this excitement, Venesection has been found inadequate, but it has entirely ceased under long continued purging with Sulphur.—

Diaphoretics are medicines of considerable efficacy in Rheumatism. In very acute cases they are improper, and should not be administered until the inflammatory symptoms have been reduced by depletion.

During their exhibition, the general rules laid down for conducting sweating should be attended to. Those of a mild nature, and which occasion the least irritation, are the most proper.— The Dover's Powder is most strongly recommended, but to obtain any benefit from it, 'tis necessary to continue its employment for some time, and to keep up a constant perspiration with it for at least twenty four hours, and as some direct, for a much longer

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period. Nitre is said to have been serviceable in many cases. It should be given shortly after bleeding, in doses as large as the patient's stomach will bear. It is likewise combined with Tart: Emet: James Powder. and sometimes with Digitalis.—

Digitalis has not been much employed, and from the vast influence it has over the arterial system, we might suppose, a priori. that it would be of great importance in diminishing inflammatory action.

Dr Barton has given it, he says, with much advantage, either alone or in union with Nitre, effecting a reduction of the frequency and fullness of the pulse, as well as of the symptoms generally. Its virtues are not decreased by its occasioning some degree of nausea. Yet, notwithstanding, as its opera-

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tion cannot be, at all times uniformly obtained and as the prompt est remedies are required in the commencement of the disease, I think it should never be substituted for V.S. purging &c

Emetics, if the stomach be in a foul state, may be administered with much benefit. They are found most useful in Rheumatism of an Intermittent type.

Mercurials are exhibited with a view to excite Ptyalism and purging. In many cases of acute Rheumatism, a salivation is succeeded by the happiest effects, and in those of a syphilitic nature, Mercury is always an indispensible article. –

The Preparations of Arsenic. a diversity of opinion is entertained of their virtues in Rheumatism. By some, their efficacy is maintained; by others, it is denied. Dr Barton says that in

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many cases Arsenic acts as a specific, and that it succeeds best in those of the most acute nature. He also remarks that it is particularly useful in Intermittent Rheumatism affecting the joints and Thorax, where he has seen it perform cures, when all other medicines had failed. This, however is the language of enthusiasm, and numerous experiments made with Arsenic in this City have demonstrated fully, that it is, at best, a precarious, and too frequently, a dangerous medicine in this disease.—

Whenever it is of any service, its good effects are evinced in a short time.—

Peruvian Bark is improper in the inflammatory stage. It is especially adapted to the Intermittent form, and should be given during the Intermission.—

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Blisters and Rubefacients, in very acute cases when the pains are severe and not permanently fixed, may perhaps be injurious, inasmuch as they tend to produce a translation of them to other parts: but after depletion has been premised, and the pains are confined to particular joints, they are highly beneficial.—

Cold Applications to the inflamed parts may be made with safety and advantage. The Russian Physicians are in the habit of using snow or pounded ice— Cloths dipped in cold water or Sac: Sat: answer every purpose.— ——..——

I shall now treat of the <u>Chronic Rheumatism</u>.—

In drawing a line of distinction between the acute and Chronic stages, I shall make use

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of the Language of Dr Cullen: "When the pains are still ready to shift their place; when at the same time they are attended with some degree of pyrexia, and with some swelling, and especially, with some redness of the joints, the disease is to be considered as partaking of the nature of the acute Rheumatism. But when there is no degree of pyrexia remaining; when the pained joints are without redness, when they are cold and stiff; when they cannot be easily made to sweat, or when, while a free and warm sweat is brought out on the rest of the body, it is clammy and cold on the pained joints; and when, especially, the pains of the joints are increased by cold and relieved by heat applied to them, the case is to be considered as purely Chronic Rheumatism." The differences between

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the two forms of the disease are here very accurately delineated, with the exception of one particular. Cullen says, that in Chronic Rheumatism there is no pyrexia; but we frequently perceive a slight degree of febrile action remaining for some time after the general characteristic symptoms of the chronic stage have supervened. Dr Barton proposed an amendment of this part of his definition which, to me, appears extremely judicious, viz. to substitute in the place of nulla, the term used by Dr Cullen, that of subnalla pyrexia. — Dr Rush also had an intermediate grade between the two forms, as his division of the disease into Rheumatismus, Rheumaticula, and Rheumatalgia, implied. —

The Acute form is generally sooner relieved by art than the Chronic. —

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Chronic Rheumatism may be seated in any joint but it is more particularly disposed to infest those which are surrounded with a number of muscles and integuments, as the hip-joint and the vertebræ.—

The Cure of Chronic Rheumatism.—

The general indication is to restore the energy of the vital principle in the diseased parts, by internal and external remedies.—

The different Preparations of Guaiacum may be exhibited with the greatest advantage. They are sometimes proper before the disease has attained the Chronic form.

The Volatile Tincture is preferable to the other preparations. The best method of employing it is, to give a large dose of it when the patient is going to bed - ℥ss or even ℥j - at the same time using some diluent drink, as Wine whey to

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assist its operation. — Guaiac: may be given in substance in doses of 10 or 15 grs. —

The Balsams are nearly allied to Guaiac: in their properties. —

The Volatile Alkali has been administered by the British Physicians in the acute stage. In this country, however, the disease is always of a too inflammatory nature to allow its exhibition until Venesection &c. have been premised. In its operation it seems nearly allied to the Guaiacum, but is inferior to it. It may be combined with the Guaiac: or when this is offensive, it may be given alone, to the amount of ʒij or ʒj per day. —

In particular cases of Chronic Rheumatism the Savin has been exhibited with the greatest success. The discrimination of those forms of Rheumatism, which require its use, demands

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considerable attention. Where the surface of the body is cold, with clammy sweats, where there is a debility of the joints, frequently amounting to an almost entire loss of motion, attended with acute topical pain, the Savin has been given with the most salutary effect. Its primary operation is that of a Stimulant - it invigorates the force of the circulation, diminishes the pains, and excites perspiration. It promises, likewise to be a valuable medicine in Syphilitic Rheumatism, and in Rheumatism, complicated with Gout. —

It should be given in doses of 10 or 15 grs. and increased, pro re nato, till its effects are fully develloped. —

Professor E Chapman has employed the Savin extensively in his public, as well as private practice, and does not hesitate to

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pronounce it superior to all other medicines in Chronic Rheumatism.—

Cantharides, in substance and in tincture, have been advantageously employed.

Unbruised Mustard-seeds, in doses of a Table spoonful, have been found serviceable.—

The Preparations of Iron have been resorted to; but little benefit is derived from them unless their exhibition is continued for a length of time.—

Turpentine has been recommended by some physicians.—

If any febrile action should remain, purging will be beneficial, and through the whole course of the disease, costiveness should always be obviated.—

When the symptoms continue refractory, and the various medicines resorted have proved

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inefficient, advantage has been derived from a slight salivation, but it requires to be managed with the greatest caution. —

If the symptoms be urgent, and the pains severe, Opiates may be given to procure rest. — The Phytolacca Decandra, according to Dr Barton, has been administered with good effect in those cases where Guaiacum is necessary. In Syphilitic Rheumatism, likewise, in combination with Calomel, its virtues have been considerable. —

In some Syphilitic cases of a Chronic nature benefit has resulted from the employment of Cicuta in combination with the mercurial preparations, — it relieves pain, and produces a determination to the surface. —

Among the External remedies for Chronic Rheumatism, Blisters, and other Stimulating

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applications are entitled to our attention. The Blisters should be either frequently repeated or the irritation caused by them continued by some stimulant ointment, as the Ung: Sabing, or of Cantharides. —

According to Dr Thomas it will be found more useful, in certain cases where the affected joints are surrounded with large muscles, to place the blister at some distance from the diseased parts, than to lay it immediately over them. —

The patient should be cloathed in flannel, and flannel sheets substituted for linen or muslin ones. —

Cold water, by affusion, or the cold bath has been highly recommended by some physicians. The Warm Bath, or the Vapour of warm water, directed to the part, has frequently proved use-

ful. It diminishes the pain, and relaxes the rigidity of the muscular fibres. —
Friction of the parts with flannel or the flesh brush should always be enjoined. —
Exercise of the part, or of the whole body, in any moderate manner, is of service. —
The Diet should be cordial and nutritious — and the patient may drink Wine whey — or Barley water in which Chrystals of Tartar have been dissolved.
In cases where a great degree of muscular contraction occurs, and the joints are in danger of becoming permanently flexed, to obviate the inconvenience resulting from a bent limb, and to prevent deformity, Dr Balfour, of Edinburgh, has advised the application of a splint to the diseased part, so as to keep it in a state of extension. —
With this, Gentlemen, I conclude my subject, and am fully sensible that many apologies are necessa-

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ty for the imperfect manner in which it has been treated. There are many remedies, highly recommended, which I have been compelled to omit for want of room: I have, however, endeavoured to select those, which appeared to me particularly useful in the management of the disease; but if, in this selection, I have err'd, or have shewn myself deficient in perspicuity of language and arrangement, I trust that you will attribute my mistakes to inexperience and want of knowledge, rather than to obstinacy and prejudice.--